DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

the specification of which is identified by the atterney (IRM) dealest number below

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

DOCKING-TYPE FUNCTION-PROVIDING APPARATUS AND PORTABLE DEVICE

the spe	cincation of which	s identified by the a	morney (ibivi) docket fluit	ibel below.
XXX		Oocket Number JP92		
	and was amended	ial No I on	(if applicable).	
		eviewed and underst any amendment re		bove identified specification, including
	owledge the duty to ance with 37 CFR 1		on which is material to	the patentability of this application in
invento	r's certificate listed	below and have also		ny foreign application(s) for patent or eign application for patent or inventor's of which is claimed:
); _Japan (Country)	_21 January 200 (Filing Date)	Priority Claimed O3 XYesNo
below a United a to discle	and, insofar as the s States application ir ose information mat	ubject matter of eacl the manner provide erial to the patentab	h of the claims of this app ed by the first paragraph o ility of this application as o	any United States application(s) listed lication is not disclosed in a listed prior of 35 USC 112, I acknowledge the duty defined in 37 CFR 1.56 which occurred ernational filing date of this application.
(Applica	ation Serial #)	(Filing Dat	te)	(Status)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 USC 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint all attorneys and/or agents associated with **CUSTOMER NO.: 25299** to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send correspondence to Joscelyn G. Cockburn, at CUSTOMER NO.: 25299 and direct all telephone calls to Joscelyn G. Cockburn at 919-543-9036. FULL NAME OF FIRST INVENTOR: Hideyuki Usui INVENTOR'S SIGNATURE: DATE: _____ RESIDENCE: 5-12-34 Higashikaigan-kita; Chigasaki-shik, Kanagawa, Japan CITIZENSHIP: Japan POST OFFICE ADDRESS: same as residence FULL NAME OF SECOND INVENTOR: Kazuihiko Yamazaki INVENTOR'S SIGNATURE: DATE: _____ RESIDENCE: 1623 Nishiki; Hiratsuka-shi, Kanagawa, Japan CITIZENSHIP: Japan POST OFFICE ADDRESS: same as residence FULL NAME OF THIRD INVENTOR: Hisashi Shima INVENTOR'S SIGNATURE: DATE: ____ RESIDENCE: 1-1-6 Ko-po Taki Tsukimino; Yamato-shi, Kanagawa, Japan CITIZENSHIP: Japan POST OFFICE ADDRESS: same as residence